Attorney's Docket No.: 42390P10678

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (FOR INTEL CORPORATION PATENT APPLICATIONS)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

## METHOD AND APPARATUS TO RETRIEVE INFORMATION IN A NETWORK

the spec	ification of which	_		
	2	is attached hereto.		
	<u>L</u>	was filed on	as	
		United States Application Nu		
		or PCT International Applica	tion Number	
		and was amended on	(if applicable)	•
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I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (ISSUED, PENDING, ABANDONED)

I hereby appoint the persons listed on Appendix A hereto (which is incorporated by reference and a part of this document) as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

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(Name of Attorney or Agent)		
📑 12400 Wilshire Boulevard, 7th Floor, Los Angeles, California 90025 and di	irect telephone calls to:	
<u>John F. Kacvinsky</u> , (503) 684-6200.	_	
(Name of Attorney or Agent)		
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belief are believed to be true; and further that these statements were made w	ith the knowledge that willfu	ll false statements and
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that such willful false statements may jeopardize the validity of the applicati	on or any patent issued there	on.
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inventor's Signature	Doto	
- inventor's Signature	Date	
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Mailing Address	
(City , State)  Mailing Address  Full Name of Fourth/Joint Inventor (given name, family name)	
Full Name of Fourth/Joint Inventor (given name, family name) Inventor's Signature	
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Inventor's Signature	Date
Inventor's Signature  Residence (City, State)  Mailing Address  Full Name of Fifth/Joint Inventor (given name, family name)  Inventor's Signature	Date

Inventor's Signature	Date	
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Mailing Address		
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Inventor's Signature	Date	
Residence	Citizenship	
(City, State)		(Country)
Mailing Address		
Full Name of Eighth/Joint Inventor (given name, family name)		
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Residence (City, State)	DateCitizenship	
Inventor's Signature  Residence (City, State)  Mailing Address	DateCitizenship	
Inventor's Signature  Residence (City, State)  Mailing Address  Full Name of Ninth/Joint Inventor (given name, family name)	Date Citizenship	(Country)
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Full Name of Eighth/Joint Inventor (given name, family name)  Inventor's Signature  Residence  (City, State)  Mailing Address  Full Name of Ninth/Joint Inventor (given name, family name)  Inventor's Signature  Passidence	Date Citizenship	(Country)
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Inventor's Signature	Date	
Residence	Citizenship	
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P. O. Address		
Full Name of Eleventh/Joint Inventor (given name, family name)		
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## APPENDIX A

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